

008-3569 MHP

RECEIVED 8.11.08

AUG 13 2008

TO WHOM IT MAY CONCERN,

RICHARD W. WIEKING
CLERK, U.S. DISTRICT COURT

NORTHERN DISTRICT OF CALIFORNIA

I'VE MADE SEVERAL ATTEMPTS TO HAVE "THE TRUST ACCOUNT STATEMENT" AND THE "CERTIFICATE OF FUNDS" FORM FILLED OUT BY THE TRUST ACCOUNT OFFICE. HOWEVER I HAVE YET TO RECEIVE A RESPONSE OR ANY TYPE OF COOPERATION FROM THEM. I HAVE ENCLOSED THE ACTION REQUEST COPY AS WELL AS A GRIEVANCE FORM SEEKING RELIEF IN THIS MATTER. I WOULD LIKE TO HAVE AN EXTENSION BECAUSE MY FILING DEADLINE IS 8.25.08. THANK YOU FOR YOUR TIME AND ASSISTANCE IN THIS MATTER.

RESPECTFULLY

Ray C. [Signature]

San Francisco Sheriff's Department / Departamento del Alguacil de San Francisco

PRISONER ACTION REQUEST / PETICION PARA PEDIR AYUDA

Instructions: If you have a particular need or request that can be taken care of by the staff of this jail, please fill out this form and give it to your housing deputy. Keep the pink copy.

Instrucciones: Si necesita algo que le puedan conceder los empleados de la carcel, por favor llene esta forma y entregela al carcelero.

Quedarse con la copia rosa.

Name: GEORGE CASAREToday's Date: 7-31-08Date of Arrest: 6-4-08Nombre: CJ2 D. BUCK

Fecha de hoy:

Fecha de arresto:

Location: 2370904 HISWristband #: 2370904Sentenced? ☐ Yes / Si

Localidad: Jail #/ Cell #/

de pulcera:

¿Sentenciado? ☒ No / No

de carcel # de celda

Subject (check one): / Clase de Asunto (Indique uno):

☐ Legal Assistance
Asistencia legal☐ Mail Problem
Problema de correo☐ Medical Problem
Problema de medico☒ Money Problem
Problema de dinero☒ Other
Otra clase de problema

Commissary Problem: / Problema de comisario:

☐ Balance Incorrect
El balance es incorrecto☐ Credit not received
No ha recibido credito☐ Order Incorrect
La orden esta incorrecta☐ Other
Otra Cosa

Describe Request / Escriba su peticion: NEED TRUST ACCOUNT STATEMENT FILLED OUT FOR
LAST (6) MONTHS (COPY). ALSO NEED ATTACHED FORM FILLED OUT. THANK
YOU FOR YOUR TIME AND ASSISTANCE.

Response by Staff / Respuesta de empleado:

Staff Signature / Firma de empleado:

Date/Fecha:

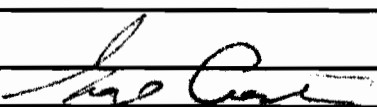
White/Blanca: Front Office/Oficina

Yellow/Amarilla: Front Office Response/Respuesta de Oficina

Pink/Rosa: Prisoner/Presado

San Francisco County Jail Facility

Prisoner Grievance Form

Type of Grievance (Place an X in the corresponding category)		Date / Time: <u>08/11/08 - 1820HRS.</u> Facility: <u>232</u> Deputy / Star# <u>TUMAMAK # 1885</u> Code _____ Log Number _____	
<input type="checkbox"/> Classification <input type="checkbox"/> Psych Services <input checked="" type="checkbox"/> Telephone	<input type="checkbox"/> Jail Medical Services <input type="checkbox"/> Food Services <input checked="" type="checkbox"/> Other		
Prisoner's Name: <u>GEORGE CASTRO</u>		Jail # <u>2370901</u>	Cell # <u>D-Block / # 13</u>
Grievance (Please be specific: time, date, etc.) ON 7-31-08 I SUBMITTED "A PRISONER ACTION REQUEST" TO TRUST ACCOUNT OFFICE REGARDING "A TRUST ACCOUNT STATEMENT" FOR THE LAST SIX MONTHS. ALSO ACCOMPANYING THE REQUEST WAS A "FORMAL PROPERIS" FORM TO BE COMPLETED BY TRUST ACCOUNT OFFICE MY DEADLINE IS 8-25-08 FOR FILING. I WOULD LIKE TO HAVE THE FORM COMPLETED AND RETURNED. BEING THIS IS LEGAL DOCUMENT CONCERNING A CLAIM AGAINST THE STATE. THANK YOU FOR YOUR TIME AND CONSIDERATION IN THIS MATTER.			
RESPECTFULLY SUBMITTED			
Prisoner's Signature 			
Must be signed for all Medical / Psychiatric Grievances. I hereby authorize Jail Health Services to disclose information contained in my records which pertain to the above complaint to the Sheriff's Department.			
Prisoner's Signature			
Note: After you have finished and signed this form, take your PINK copy for your records.			
Staff member's response:			
Signature:		Date:	
Prisoner's Signature:		<input type="checkbox"/> Satisfied With Response <input type="checkbox"/> Prisoner Appeal	
Supervisor's response:			
Signature:		Date:	
Prisoner's Signature:		<input type="checkbox"/> Satisfied With Response <input type="checkbox"/> Prisoner Appeal	
Facility Commander response:			
Signature:		Date:	
Original (Facility Copy)		Gold (Response To Prisoner)	
Facility Copy		Pink (Prisoner Copy)	

George Castro
#2370905 D.13
800 Bryant St.
S.F. CA. 94103

SAN FRANCISCO CA 941

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CLERK OF THE UNITED STATES DISTRICT
COURT FOR NORTHERN DISTRICT OF CALIFORNIA
450 GOLDEN GATE AVE, Box 36060
SAN FRANCISCO, C.A. 94102

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